CITY FUNDED GRANTS FOR PUBLIC SERVICES ENDOWMENT FUNDS PROPOSAL SUBMISSION FORM FY 2004/2005

The City of Scottsdale is requesting proposals for the use of Endowment Funds for activities in the following categories:

- The Scottsdale Community Endowment Fund is used to carry out the purposes of community projects and programs for the public good within the city. Qualifying organizations shall be City of Scottsdale programs. The anticipated total amount for distribution is up to \$2,000 in one-time grants of \$800 to \$1,000 each.
- The Herbert R. Drinkwater Youth Fund is used to support City of Scottsdale youth programs. Qualifying organizations shall be either City of Scottsdale programs or organizations that are tax exempt under Section 501 (c)(3) of the Internal Revenue Code. The anticipated total amount for distribution is up to \$990 in one-time grants of \$800 to \$990 each.

City of Scottsdale Endowment Funds are awarded on a competitive basis to city programs and non-profit 501(c)(3) agencies that serve Scottsdale residents. To avoid potential problems, applicants are encouraged to contact the Human Services Division at (480) 312-2646 for further clarification when requirements seem unclear.

To be considered for funding during the 2004/2005 fiscal year, an original and five (5) copies of this proposal, as well as one (1) copy of the Internal Revenue Service determination letter and the most recent audited financial statement and management letter must be completed and submitted to the Human Services Division office prior to 5:00 p.m., November 24, 2003. Proposals postmarked on the due date but not received by Human Services staff by the required time will not be considered.

- Electronic or fax submissions will not be accepted
- All material submitted must be on standard white 8½ x 11 inch paper
- The original application is not to be permanently bound in any way. Each copy should be stapled.
- Do not include extraneous material, unnecessary packaging, or a letter of transmittal.

SUBMISSIONS MAY BE MAILED OR HAND-DELIVERED TO:

Attn: Planner Human Services Administration City of Scottsdale 7340 Scottsdale Mall Scottsdale, AZ 85251

Scottsdale Endowment Application

Proposal for use of Endowment Funds:
Date:
Department or Agency requesting funding:
Name and telephone number of contact:
Brief description of program/need for which funds are being requested:
Amount requested (please break out costs): \$
Describe how the funds will be used:
What need will be filled and who will benefit?
Have you pursued other funding sources?
If so, describe:

How long will requested funding benefit this program?
Do you receive funds from other sources for this program/need?
If so, describe:
Will requested funds displace tax dollars? (for City of Scottsdale programs only)
Requested by:Title: *Attach additional information if necessary